

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

FY 2009

(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)

Docket Number (Optional)
FR030121US

Application No. 10/575,425

Filed: April 10, 2006

For: DIFFERENTIAL INPUT AND OUTPUT TRANSCONDUCTANCE CIRCUIT

Art Unit: 2816

Examiner: Poos, John W.

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above-identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

	Fee	Small Entity Fee	
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ 130	\$ 65	\$ 130.00
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ 490	\$ 245	\$ 0
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$ 1110	\$ 555	\$ 0
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ 1730	\$ 865	\$ 0
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ 2350	\$ 1175	\$ 0
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.			
<input type="checkbox"/> A check in the amount of the fee is enclosed.			
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.			
<input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account #50-1123.			
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. 50-1123.			

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

I am the ☐ applicant/inventor.
☐ assignee of record of the entire interest. See 37 CFR 3.71.
 Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).
☒ attorney or agent of record. Registration Number 52,411.
☐ attorney or agent under 37 CFR 1.34.
 Registration number if acting under 37 CFR 1.34 _____.



Signature
Scott J. Hawranek

Typed or printed name

3/15/09

Date
(719) 448-5920

Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of 1 form is submitted.